(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

1. Name of Lobbyist(s): Debra Miller, Julianne McConnell, Tara Reardon

RECEIVED

NOV 0 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist	DEPARTMENT OF S		
	ire Community Loan Fund		
7 Wall Street	Concor	d NH	02201
-	rect) (Town/City		03301 (Zip Code)
,	•	•	
(603) <u>224-6669</u> (Telephone)	(603) 225-7425	(Fax) c-mail kdery@(communityloanfund.org
reportable expense t	overs: (Choose one – file separate re ransactions which are not attributa neations occurring in the months prio	ble to any one client).	
OR All reportable tran unrelated to any particular	(Full Name of Client as it appears on the sactions by the lobbyist (including the cular client.		ng firm listed below which are
IV. Date of Report	April 25, 2018	July 25, 2018	
Reports cover: activ	rity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/1	
	October 31, 2018 🕅 activity from 7/1/18 to 9/30/18	January 30, 2019 ☐ activity from 10/1/18 to 12/3	
	n no fees received and no reporta complete just this form and submit it		
VI. Check if addition	nal reports are attached:		
*	red fees or made expenditures, you mu		·
☐ If you have paid a Expense Reimbursem	an honorarium or reimbursed expenses ent	s, you must file Addendum B- R	eport of Honorariums or
ĭ If you, your firm,	or your family has made political con	tributions, you must file Addend	um C- Political Contributions
I have read RSA 15, I and complete to the b	firmation by Lobbyist RSA 15-B, RSA 14-C and RSA 664 arest of my knowledge and belief.	and hereby swear or affirm that the $\frac{10/29/12}{(Date)}$	
Debra Miller			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

Debra Miller

(Print Name of lobbyist)

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NEW HAMPSHIRE DEPARTMENT OF STATE

Statement	of Income	c and Expenses for	•	•	
Name of Lol	bbying part	nership, firm, or corp	noration: New Hampshire	Community Loan Fund	
	Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any				
particular client):					
Date of Rep	ort (check	one):		,	
April 25, 20	018 🗆	July 25, 2018	October 31, 2018 🕱	January 30, 2019 □	
				nd Expenses described above, and umber of Addendum forms being	
_X Add	endum A(s	s).			
Add	endum B(s).			
Add	lendum C(s).		·	
complete to	the best of	m that the foregoing my knowledge and b		nt and each Addendum is true and	

10/29/18

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmati Statement of Income and E				1.1 . " Milati in
Name of Lobbying partnership,	firm, or corporation	New Hampshir	e Community Loan	r,Fund
Name of Client (leave blank if S				
particular client):				enated to unity
Date of Panor (about one)		•		
Date of Report (check one):				
April 25, 2018 July 2	5, 2018 Oct	tober 31, 2018 🛭	January 30, 2019	
I have read RSA 15, RSA 15-B the following Addendums subn submitted):				
X Addendum A(s).				
Addendum B(s).				
X Addendum C(s).				
I hereby swear or affirm that the complete to the best of my know		tion on the Stateme	nt and each Addendun	n is true and
Signature of lobbyist)	inecl		10/29/18 (Date)	·
Julianne McConnell				
(Print Name of lobbyist)		•		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

NOV 0 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying partn	ership, firm, or corp	poration: New Hampshire	Community Loan Fund	
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):				
Date of Report (check o	ne):			
April 25, 2018 □	July 25, 2018	October 31, 2018 🕱	January 30, 2019 □	
			nd Expenses described above, and umber of Addendum forms being	
X Addendum A(s).				
Addendum B(s).				
Addendum C(s).				
I hereby swear or affirm complete to the best of many (Signature of lobbyist) Tara Reardon (Print Name of lobbyist)			and each Addendum is true and	

STATE OF NEW HAMPSHIRE RECEIVED

Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist'	s partnership, firm or corporation, if any:		
,	Community Loan Fund		
	of partnership, firm or corporation)	<u>-</u>	
III. Name of Client	N/A	Da	te
to lobbying, including	ant of all fees received from the client identified above fees for services such as public advocacy, government initoring legislation, and related legal work. The gests:	nt relation	is, or public relations service
a) Total of all fees rece	ived in this reporting period	a) \$ _	0
	eived this calendar year, prior to this reporting period the total of all prior monthly reports for this calendar		0
e) Total of all fees rec (Add lines a and		c) \$ _	0.
d) Indicate the amount yet been paid	of any such fees that arc due, but have not	d) \$ _	0
fees. Separate reports the lobbyist(s)/firm that Expenses are to be rep during the reporting poindividual expenses wh lunch where the cost w being lobbied, purchase (c) an itemized stateme any purpose not cover- ceremonial object to be restaurant expenses for	partnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each at are unrelated to any one client a separate report corted in one of three categories of expenses: (a) the proof of salaries, benefits, support staff, and office a cere the expenditure was of \$25.00 or less (for examples \$25.00 or less, purchase of a pen with a value of the cortex of a ceremonial object given to a person being lobbent of each individual expenditure made during this report of the subject of lobbying with a value greater a legislative reception). Expenses for honorarium corted on separate addendums and should not be reported to the subject of lobbying with a value greater addendums and should not be reported to the subject of lobbying with a value greater addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject addendums and should not be reported to the subject and should not be reported to th	may be the aggreg expenses; ple: meal ess than s ied with a corting per lue of gr ter than s s, expens	In differ expenditures are made by filed for the lobbyist(s)/firm that total of all expenses paid (b) the aggregate total of all so purchased during a business \$10 that is given to the person a value of \$25.00 or less); and the person of the person of the person of \$25.00 for less (b) that is given to the person of \$25, but not greater than \$25, but not greater than \$50 the reimbursement, or political
	enses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$ _	0
b) Total aggregate of e in a), of \$25 or less.	spenditures during this reporting period, not reported	b) \$ _	0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$369.42
f) Total of all expenses year to date	f) \$369.42
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
***************************************	·
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
All smill	10/29/18
(Signature of lobbyist)	(Date)
DEBRA MILLER	
(Print Name of lobbyist)	The state of the s